

Division of Laboratory Services 630 Hart Lane Nashville, TN 37216 615-262-6300

https://www.tn.gov/health/health-program-areas/lab.html

Disease/Agent Suspected or Test Requested: <u>Human Immunodeficiency Virus Type 1 (HIV-1)</u>

Provider Requirements	
Acceptable Specimen Sources/Type(s) for Submission	Whole, clotted bloodSerumPlasma
TDH Requisition Form Number	PH-4182
Media Requirements	 Red-stoppered vacuum tube (whole blood) Sterile, plastic screw capped vial (serum) EDTA (plasma)
Special Instructions	 PTBMIS Order Code: 87389 (HIV COMBO AB/AB EIA) StarLIMS Order Code: 5032 (HIV Panel) Specimens may be stored for up to 3 days at room temperature (20 to 23°C) or up to 7 days at 2-8°C. If testing will be delayed more than 3 days for specimens stored at room temperature or more than 7 days for specimens stored at 2-8°C, aliquot serum or plasma and store at -20°C or colder.
Shipping Instructions	 Ship Room Temperature/ambient If specimen has been refrigerated, ship on cold packs. If specimen is frozen, ship on dry ice.
Laboratory Section Performing Testing	Serology
Lab Location(s) Performing Test	Nashville; Knoxville

All infectious substance shipments must conform to U.S. Department of Transportation (DOT) Hazardous Materials Regulations (HMR 49 C.F.R Parts 171-180).